

Tiverton Police Headquarters
20 Industrial Way
Tiverton, Rhode Island 02878

POLICE OFFICER APPLICATION FOR EMPLOYMENT

This application must be typed or clearly printed in ink. All items in this application must be filled in completely, correctly and truthfully, to the best of your knowledge, and signed by the applicant. Any applications that are incomplete and/or illegible may be rejected by the Town of Tiverton.

SECTION I - PERSONAL HISTORY

[illegible]

SECTION II - EDUCATION

DATES				SCHOOLS / COLLEGES			
FROM		TO					
MO.	YR.	MO.	YR.				
				HIGH SCHOOL		MAJOR	DIPLOMA OR DEGREE
				ADDRESS	CITY / TOWN	STATE	
				COLLEGE OR UNIVERISTY		MAJOR	DIPLOMA OR DEGREE
				ADDRESS	CITY / TOWN	STATE	
				COLLEGE OR UNIVERSITY		MAJOR	DIPLOMA OR DEGREE
				ADDRESS	CITY / TOWN	STATE	
				OTHER EDUCATIONAL INSTITUTIONS		MAJOR	DIPLOMA OR DEGREE
				ADDRESS	CITY / TOWN	STATE	

WERE YOU EVER SUSPENDED, DISMISSED, OR EXPELLED FROM ANY OF THE ABOVE SCHOOLS OR ANY OTHER EDUCATIONAL INSTITUTIONS, DURING YOUR SCHOLASTIC CAREER?

YES ☐ NO ☐ SCHOOL _____ DATE _____ TYPE OF ACTION _____

LIST ANY AWARDS, HONORS, CITATIONS, POSITIONS HELD IN SCHOOL ORGANIZATIONS, ATHLETIC ENDEAVORS, OR OTHER SPECIAL RECOGNITION YOU HAVE RECEIVED WHILE ATTENDING SCHOOL

1.

SECTION III - FORMER ADDRESSES

LIST CHRONOLOGICALLY ALL OF YOUR RESIDENCES IN THE PAST TEN YEARS, INCLUDING THOSE IN THE MILITARY (OFF BASE) AND THOSE WHILE AWAY FOR SCHOOL IF APPLICABLE. PLEASE ACCOUNT FOR ALL TIME. USE ANOTHER SHEET OF PAPER IF NECESSARY.

DATES				STREET ADDRESS	CITY	STATE	ZIP
FROM		TO					
MO.	YR.	MO.	YR.				

SECTION IV - MILITARY SERVICE RECORD

Read and Answer **ALL BOXES** within this section, if applicable.

HAVE YOU EVER SERVED ON ACTIVE DUTY IN THE ARMED FORCES? YES <input type="checkbox"/> NO <input type="checkbox"/>		BRANCH OF MILITARY SERVICE	
HIGHEST RANK ATTAINED: DATE COMMISSIONED (If applicable)		TYPE OF DISCHARGE BASIS OF DISCHARGE	
SERIAL NUMBER DATES OF ACTIVE DUTY (MM/DD/YY) FROM / / TO / /		WAS ANY TYPE OF DISCIPLINARY ACTION TAKEN AGAINST YOU WHILE IN THE SERVICE? YES <input type="checkbox"/> NO <input type="checkbox"/> ACTION:	
HAVE YOU OR ARE YOU NOW SERVING IN A MILITARY RESERVE UNIT? IF YES, THEN WHAT BRANCH?		YES <input type="checkbox"/> NO <input type="checkbox"/>	BRANCH:
HAVE YOU OR ARE YOU NOW SERVING IN A NATIONAL GUARD UNIT? IF YES, THEN WHAT UNIT?		YES <input type="checkbox"/> NO <input type="checkbox"/> :	

SECTION V - EMPLOYMENT HISTORY

LIST ALL EMPLOYMENT CHRONOLOGICALLY, INCLUDING SUMMER AND PART-TIME EMPLOYMENT, FOR THE LAST FIVE YEARS. BE SURE TO ACCOUNT FOR TIME WHILE UNEMPLOYED, IF APPLICABLE. ALL TELEPHONE NUMBERS ARE MANDATORY

COMPANY NAME		NAME OF SUPERVISOR		TELEPHONE ()
ADDRESS / CITY / STATE				
SALARY / WAGES		TYPE OF WORK		POSITION
STARTING DATE / /		ENDING DATE / /		REASON FOR LEAVING

SECTION V - EMPLOYMENT HISTORY (continued)

COMPANY NAME	NAME OF SUPERVISOR	TELEPHONE ()
ADDRESS / CITY / STATE		
SALARY / WAGES	TYPE OF WORK	POSITION
STARTING DATE / /	ENDING DATE / /	REASON FOR LEAVING

COMPANY NAME	NAME OF SUPERVISOR	TELEPHONE ()
ADDRESS / CITY / STATE		
SALARY / WAGES	TYPE OF WORK	POSITION
STARTING DATE / /	ENDING DATE / /	REASON FOR LEAVING

COMPANY NAME	NAME OF SUPERVISOR	TELEPHONE ()
ADDRESS / CITY / STATE		
SALARY / WAGES	TYPE OF WORK	POSITION
STARTING DATE / /	ENDING DATE / /	REASON FOR LEAVING

COMPANY NAME	NAME OF SUPERVISOR	TELEPHONE ()
ADDRESS / CITY / STATE		
SALARY / WAGES	TYPE OF WORK	POSITION
STARTING DATE / /	ENDING DATE / /	REASON FOR LEAVING

HAVE YOU EVER BEEN DISMISSED OR FORCED TO RESIGN FROM A POSITION?

YES ☐ NO ☐

IF YES, GIVE NAME OF EMPLOYER _____

SECTION VI - CHARACTER REFERENCES

LIST THREE REFERENCES, WHO ARE REPUTABLE CITIZENS OF THEIR COMMUNITIES, AND ARE WILLING TO ATTEST TO YOUR CHARACTER AND REPUTATION. LIST THOSE WHO HAVE KNOWN YOU FOR AT LEAST FIVE YEARS, PREFERABLY THE LAST FIVE YEARS. (DO NOT INCLUDE ANY PRESENT OR PAST EMPLOYERS. ANY RELATIVES BY BLOOD OR MARRIAGE, OR SCHOOL TEACHERS)

COMPLETE NAME	OCCUPATION	NO. OF YEARS KNOWN
RESIDENCE ADDRESS	CITY	STATE ZIP TELEPHONE ()
BUSINESS ADDRESS	CITY	STATE ZIP TELEPHONE ()

COMPLETE NAME	OCCUPATION			NO. OF YEARS KNOWN
RESIDENCE ADDRESS	CITY	STATE	ZIP	TELEPHONE ()
BUSINESS ADDRESS	CITY	STATE	ZIP	TELEPHONE ()

COMPLETE NAME	OCCUPATION			NO. OF YEARS KNOWN
RESIDENCE ADDRESS	CITY	STATE	ZIP	TELEPHONE ()
BUSINESS ADDRESS	CITY	STATE	ZIP	TELEPHONE ()

SECTION VII - COURT RECORDS

[illegible]

SECTION VIII - DRIVING RECORD

LIST ALL MOTOR VEHICLE VIOLATIONS YOU HAVE RECEIVED OVER THE LAST TEN YEARS.

DATE	VIOLATION	POLICE DEPARTMENT	DISPOSITION

LIST ALL ACCIDENTS YOU HAVE BEEN INVOLVED IN WHILE OPERATING A MOTOR VEHICLE OVER THE LAST TEN YEARS.

DATE	TYPE	POLICE DEPARTMENT	WERE YOU INJURED?	WERE YOU FOUND AT FAULT?
			YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
			YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
			YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
			YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>

PERSONAL QUESTIONNAIRE

LIST ANY SPECIAL SKILLS OR TRAINING YOU HAVE ACQUIRED THAT WOULD BE BENEFICIAL TO THE TIVERTON POLICE DEPARTMENT. (INCLUDE ANY LANGUAGE SKILLS, FIREARMS TRAINING, COMPUTER SKILLS, ETC.)

LIST ANY AWARDS, CERTIFICATES, OR HONORS RECEIVED, OTHER THAN THOSE LISTED UNDER "SECTION II - EDUCATION" OF THIS APPLICATION.

LIST ANY PUBLIC SERVICE OR COMMUNITY ACTIVITIES IN WHICH YOU ARE CURRENTLY INVOLVED OR HAVE BEEN INVOLVED IN PAST YEARS.

PERSONAL QUESTIONNAIRE (continued)

IS THERE ANYTHING IN YOUR BACKGROUND OR PERSONAL HISTORY THAT WOULD ADVERSELY AFFECT YOUR ABILITY TO PERFORM THE DUTIES AND RESPONSIBILITIES OF A POLICE OFFICER? YES ☐ NO ☐ IF YES, EXPLAIN BELOW.

EXPLAIN IN YOUR OWN WORDS WHY YOU ARE INTERESTED IN BECOMING A MEMBER OF THE TIVERTON POLICE DEPARTMENT. (PLEASE ATTACH A SEPARATE PIECE OF PAPER FOR THIS RESPONSE, WHICH SHOULD NOT EXCEED ONE PAGE.)

I HAVE READ THIS APPLICATION AND THE ENTRIES MADE HEREIN, AND HEREBY STATE THAT ALL SUCH STATEMENTS MADE BY ME ARE TRUE. I UNDERSTAND THAT ANY FALSE OR MISLEADING INFORMATION GIVEN IN THIS APPLICATION MAY SERVE AS THE BASIS FOR DISMISSAL FROM THE RECRUIT SELECTION PROCESS.

I AGREE TO THESE CONDITIONS, AND I HEREBY CERTIFY THAT ALL STATEMENTS MADE BY ME ON THIS APPLICATION ARE COMPLETE, CORRECT AND TRUTHFUL TO THE BEST OF MY KNOWLEDGE.

SIGNATURE _____ DATE _____